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7590

01/28/2004

PHILLIP IGBINADOLOR 88-30 SUTPHIN BLVD. Jamaica, NY 11435

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| PHILLIP | IGBI | NADOLOR | (Depositor's name) |
|----------|-------|---------|--------------------|
| | | | (Signature) |
| FEBRUARY | 7 06, | 2004 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. | J | | | |
|---|-------------|----------------------|---------------------|------------------|---|--|--|--|
| 09/135,504 | 06/22/1998 | PHILLIP IGBINADOLOR | | 9420 | | | | |
| TITLE OF INVENTION: INTEGRATED CAR DUBBING SYSTEM | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEI | PUBLICATION F | TEE TOTAL FEE(S) DUE | DATE DUE 04/28/2004 | |
|--|--------------|-----------|---|--|------------------------|--|
| nonprovisional | YES | \$665 | \$0 | \$665 | | |
| EXAMINER | | ART UNIT | CLASS-SUBCLA | SS | | |
| SLOAN, N | ATHAN A | 2614 | 725-105000 | . | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent fron names of up to 3 registered agents OR, alternatively, (2) th firm (having as a member a reagent) and the names of up to attorneys or agents. If no name will be printed. | patent attorneys or 1 ne name of a single registered attorney or 2 registered patent | | |

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

| (A) NAME OF ASSIGNEE | (B) RESIDENCE. (CITT and STATE OR COUNTRY) | | | | | |
|---|---|--|---------------|--|------------------------|--|
| Please check the appropriate assignee category or ca | ategories (will not be printed on the patent); | □ individual | □ corporati | on or other private group entity | ☐ government | |
| 4a. The following fee(s) are enclosed: | 4b. Payment of Fee(s): | | | | | |
| X Issue Fee | A check in the amo | ount of the fee(s) i | s enclosed. | | | |
| ☐ Publication Fee | ☐ Payment by credit | ☐ Payment by credit card. Form PTO-2038 is attached. | | | | |
| Advance Order - # of Copies | ☐ The Director is he Deposit Account Num | reby authorized laber | by charge the | e required fee(s), or credit any (enclose an extra copy of this | overpayment, to form). | |
| Director for Patents is requested to apply the Issue F | Fee and Publication Fee (if any) or to re-apply | any previously p | aid issue fee | to the application identified abo | ove. | |
| (Authorized Signature) | (Date) 02/06/04 | 02/12/2004 | CCHAU2 | 00000002 09135504 | | |
| NOTE; The Issue Fee and Publication Fee (if re other than the applicant; a registered attorney of interest as shown by the records of the United Stat | r agent; or the assignee or other party in | 01 FC:250 | L | 665.00 | 0 P | |
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